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New**COMPLAINT BY A PRISONER UNDER THE CIVIL RIGHTS ACT, 42 U.S.C §§ 1983**Name FOSTER CLEAVON Y

(Last) (First) (Initial)

Prisoner Number #2350166Institutional Address COUNTY JAIL #5' P.O. BOX 67'  
SAN BRUNO' CALIFORNIA - 94066FEB 25 2008  
RICHARD W. WICKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

JSW

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIACLEAVON Y. FOSTER

(Enter the full name of plaintiff in this action.)

CV

08

1125

Case No.

(To be provided by the clerk of court)

COMPLAINT UNDER THE  
CIVIL RIGHTS ACT,  
42 U.S.C §§ 1983

PR)

(Enter the full name of the defendant(s) in this action))

E-filing

*[All questions on this complaint form must be answered in order for your action to proceed..]*I. Exhaustion of Administrative Remedies

[Note: You must exhaust your administrative remedies before your claim can go forward. The court will dismiss any unexhausted claims.]

A. Place of present confinement SAN FRANCISCO COUNTY JAIL #5

B. Is there a grievance procedure in this institution?

YES  NO 

C. Did you present the facts in your complaint for review through the grievance procedure?

YES  NO 

D. If your answer is YES, list the appeal number and the date and result of the

1 appeal at each level of review. If you did not pursue a certain level of appeal,  
 2 explain why.

3 1. Informal appeal THIS PETITION DOES NOT  
 4 WARRANT ADMINISTRATIVE REVIEW

5 \_\_\_\_\_ 2. First  
 6 formal level NA

7 \_\_\_\_\_  
 8 \_\_\_\_\_  
 9 3. Second formal level NA

10 \_\_\_\_\_  
 11 \_\_\_\_\_ 4. Third  
 12 formal level NA

13 \_\_\_\_\_  
 14 \_\_\_\_\_  
 15 E. Is the last level to which you appealed the highest level of appeal available to  
 16 you?

17 YES ( ) NO

18 F. If you did not present your claim for review through the grievance procedure,  
 19 explain why. THIS PETITION DOES NOT WARRANT  
 20 ADMINISTRATIVE REVIEW

21 \_\_\_\_\_  
 22 II. Parties

23 A. Write your name and your present address. Do the same for additional plaintiffs,  
 24 if any.

25 CLEAVON Y. FOSTER' COUNTY JAIL #5'  
 26 P.O. BOX 67' SAN BRUNO' CA - 94066

27 \_\_\_\_\_  
 28 B. Write the full name of each defendant, his or her official position, and his or her

1 place of employment.

2 DISTRICT ATTORNEY ~ MS. KAMALA HARRIS  
3 HALL OF JUSTICE ' 850 BRYANT STREET '  
4 SAN FRANCISCO ' CALIFORNIA - 94103

5

6 III.

7 Statement of Claim

8 State here as briefly as possible the facts of your case. Be sure to describe how each  
9 defendant is involved and to include dates, when possible. Do not give any legal arguments or  
10 cite any cases or statutes. If you have more than one claim, each claim should be set forth in a  
11 separate numbered paragraph.

12 I WAS ARRESTED ON JAN. 8<sup>TH</sup>, 2008. HELD IN  
13 CUSTODY. THEN TAKEN TO A ARR AIGNMENT  
14 HEARING ON JAN. 15<sup>TH</sup>, 2008. WHICH IS "7"  
15 DAYS AFTER MY ARREST. THIS IS A -  
16 DIRECT VIOLATION OF PENAL CODE # 825. A  
17 VIOLATION OF MY DUE PROCESS RIGHTS UNDER  
18 THE 5<sup>TH</sup> AND 14<sup>TH</sup> AMENDMENTS TO THE  
19 UNITED STATES CONSTITUTION. VIOLATION OF  
20 THIS STATUTE HAS IMPAIRED AND PREJUDICED  
21 MY ABILITY FOR A DEFENSE. I HAVE  
22 WRITTEN TO THE COURTS ASKING FOR THEM  
23 TO STOP THIS ILLEGAL PRACTICE... .

24

25 IV. Relief

26 Your complaint cannot go forward unless you request specific relief. State briefly exactly  
27 what you want the court to do for you. Make no legal arguments; cite no cases or statutes.

1 I AM ASKING FOR \$999.<sup>99</sup> ~~.00~~ PER EACH DAY  
2 THAT I AM UNLAWFULLY detained. I AM  
3 SUFFERING GREATLY FROM STRESS. I AM  
4 AND A DISMISSAL OF THIS ILLEGAL PROSECUTION

5  
6  
7 I declare under penalty of perjury that the foregoing is true and correct.

8  
9 Signed this February day of 10<sup>th</sup>, 2008

10  
11 Cleavon Fisher  
12 (Plaintiff's signature)

JMK CLERK U.S. DISTRICT COURT  
COUNTY DIVISION - P.O. BOX 67  
SAN FRANCISCO, CA 94166

\*CONFIDENTIAL

RECEIVED  
CLERK, U.S. DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA

To: Clerk of the United States District  
Court for the Northern District of California  
450 Golden Gate Avenue

SAN FRANCISCO, CALIFORNIA

(ZIP code) 94102

SP1023651 COCA



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